DEFECTIVE SIGHT: ITS CAUSE & CURE.

BY

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FOREWORD.

Mr. K. L. Sarma, the Father of Naturopathy, needs no introduction. The public know his great talents ; the miracles he has worked out with a simple tub and his unequalled sacrifice at the Altar, of Mother Nature. His family is evidently one guided by the Divine—those who know its history, can clearly see a Supra sensual Hand leading its destiny. The gem of that family is Mr. L. Kamesvaran the author of this small but important booklet. Mr. Kamesvaran B. Sc. is a model of a student—studious, intelligent, well disciplined. Along with his studies he has found time to do a lot of work for Naturopathy following the footsteps of his renowned father. This blooming prodigy of the Tamil Nadu presages a bright and promising future. The father's great sacrifices have been neatly recompensed by the son. Master Sharma is the fulfilment of his father. Ainsi—soit-il ! (So be it).

This booklet has been ably written and is worthy of study by the student population.

Every illness leaves its mark on the eyes. The eye must be carefully guarded. Food regulations, sufficient sleep, rest, clean bowels, free use of sun light, water and air, proper recreation and exercise, constant thinking and above all Brahmacharya.—These are indispensable for health and eye preservation. The ways of preserving the eye and of recovering the sight when lost has been clearly explained in this booklet. This interesting treatise upon the vitally important question of preserving the eye is a welcome addition to the literature of Nature-cure.

(Sd.) SHUDDHANANDA BHARATI.

DEFECTIVE SIGHT: ITS CAUSE AND CURE.

CHAPTER I

1. This Trade in Spectacles.

Time was when spectacles were considered to be fit only for old men, whose eyes were not good enough for reading small print at night. And they cost precious little, though the lenses had to be made in the old, crude way, by a laborious process ; and there was no fee to pay for the doctor's prescription.

Little boys wearing spectacles in the daytime were first to be seen a few decades after the modern schools were opened; at first the spectacle-wearing boys were few—barely one in a class of thirty boys. Soon their number began to increase, and now it is difficult to say without taking a census for short sight in schools whether the four-eyed or the two-eyed ones are in the majority.

Naturally, this trade in spectacles is a lucrative one both for doctors and the dealers. But the income earned in this way is just a measure of the advancing degeneracy of the race. It is facts like these that expose the hollowness of the claim that science as pursued by the experts of our time is increasing the sum of human welfare.

In not a few cases, the glasses have to be changed again and again, the power being raised each time, until a time comes, when the power can no more be raised; meanwhile the wearer's health grows worse until even the most optimistic of doctors is compelled to admit that nothing more can be done for the sufferer; he is warned that he must refrain from all work, not that he may get better, but that he may not get worse; even at this stage, if the man happens to hear of the Nature-Cure, and gives it a trial, he may in a reasonable time recover both health and normal vision.

This trade in glasses is built upon the medical teaching that short sight is incurable, which in turn is based on certain physiological falsehoods, which have been sanctified by authority and hence cannot be questioned by 'any holder of a medical diploma, unless he is prepared to face the worst possible persecutions at the hands of the organised medicine. It might not be supposed that it is a simple matter to depose established doctrines, even if they happen to be false, even if ample proof be available. Medical science is organised, not in a strictly impersonal scientific spirit but in a thoroughly human trade-unionist mentality. The proof of this is not far to seek; it has been recognised by wise observers, like Mr. G. B. Shaw. We have also on this subject the experience of Dr. Bates, who had the misfortune to discover the falseness of the medical physiology of the eye. This will be explained in the next chapter; here we shall just record the opinion expressed by Dr. Bates in his book, "The Cure of Imperfect Sight by Treatment Without Glasses," that it is not reason but blind submission to authority, and consequent intolerance of originality that governs the practice of medicine. How can men with this mentality be regarded as men of science?

CHAPTER II

2. Physiology of the Eye.

The belief in the value and necessity of glasses for all cases of defective vision is well rooted in the minds of the allopaths. It is based on the assumption that defective vision is due to permanent defects in the shape of the lens of the eye which can only be alleviated by suitable glasses. But the researches of Dr. Bates M.D., of New York, have proved that defects of vision are *not* due to permanent changes in the shape of the lens, but to functional derangements that are capable of being overcome by simple natural methods. Thus there are two methods of treatment; carried on by two rival schools—those who think that defective vision is incurable but can be alleviated; and those who realise that defects are due to a number of causes, each of them capable of being overcome.

To understand how these methods differ and how they produce different results, a little knowledge of the structure of the eye may be helpful. The eye-ball is a hollow elastic body, nearly spherical in form. The segment of a smaller sphere projects in front. The larger sphere is made up of three coats,—the sclera or scleratic coat, the choroid and the retina. The scleratic coat is a tough, opaque fibrous membrane. It serves to protect the inner parts from injury and to preserve the spherical shape of the eye. Its frontal portion is as transparent as glass, and is called the cornea, through which light is transmitted to the interior of the eye.

The choroid or the middle coat is made of connective tissue, and contains the blood-vessels, and pigment cells; hence work of the choroid layer is to supply nutriment to the whole eye-ball. Just behind the cornea, choroid becomes visible, and is called the iris, with the opening called the pupil in its centre. The iris is a circular, mobile coloured curtain, suspended in the aqueous humour behind the cornea and in front of the crystalline lens, which focusses the light on the retina. Around the lens, the choroid forms into folds known as he ciliary processes, which contain within them the ciliary muscle, which is connected with the lens by means of small ligaments. The retina is an extension of the optic nerve, which comes from the brain; it serves to receive impressions from the outside world, conveys them through the optic nerve to the centre of vision in the back portion of the brain. There are also the external muscles which connect the eye-ball to different points in the socket; these are very important as we shall see later.

With these facts in mind we can clearly see how outside objects are photographed on the retina. Light rays pass through the cornea; the pupil cuts off the outer rays, and allows only the central rays to pass through the lens; the lens, which is convex in shape, focusses these rays on the sensitive screen called the retina, so that an inverted image is formed; the optic nerve carries this image to the brain and vision is the result. If any of the links in this chain should go slightly out of order or degenerate, then the vision would be impaired—would be abnormal.

Thus we see that the eye is like a photographic camera; but the latter has to be adjusted to the distance of the object to be photographed; so adjusted, it gives a clear image of that object and more or less blurred images of others. Does the eye adjust itself in the same way? If so, how does it do so?

It is undeniable that the eye does adjust itself, at least for those who have not felt a need to use glasses. Such persons do see clearly both near and distant objects. That is, the eye has some natural mechanism, by which the light is focussed accurately on the retina every time; in some way the eye is able to do this, whatever may be the distance of the object; and only those eyes that do this best are normal eyes.

This adjustment of the eye to distance is called accommodation. Now the question is, how accommodation takes place.

Allopathic doctors say that the eye is able to see both distant and near objects, that is, it accommodates itself to different distances, by the contraction and expansion of the crystalline lens (thus changing the focal length of the lens), owing to the action of the ciliary muscle upon it. According to this view, the eyeball is a rigid body, which does not change its shape and takes no part in accommodating the sight to distances.

But in the experiments of Dr. Bates, upon the extrinsic muscles of the eye of fish, rabbits, cats, dogs and other animals, the demonstration seemed to be complete that in the eyes of these animals accommodation depends wholly upon the action of the extrinsic muscles and not at all upon the agency of the lens. By a manipulation of these muscles he was able to produce or prevent accommodation at will, to produce temporary myopia, (short sight) hypermetropia, and astigmatism, or to prevent these conditions.

He has also found that the eyes from which the lens had been removed or in which it had been pushed out of the axis of vision, responded to electrical stimulation precisely as did the normal eye, so long as the muscles were active; but when they had been paralysed by the injection of atropine deep into the orbit, electrical stimulation had no effect on the refraction. "In one experiment the lens was removed from the right eye of a rabbit, the refraction of each eye having first been tested by retinoscopy and found to be normal. The wound was then allowed to heal. Thereafter, for a period extending from one month to two years, electrical stimulation produced accommodation in the lensless eye precisely to the same extent as in the eye which had a lens. The same experiment with the same result was performed on a number of other rabbits, on dogs, and on fish," so writes Dr. Bates. A rabbit with the lens removed was exhibited by Dr. Bates at a meeting of the Ophthalmological section of the American Medical Association, held in Atlantic City, and was examined by a number of ophthalmologists present, all of whom testified that electrical stimulation of the eyeball produced accommodation or myopic refraction, precisely as in the normal eye. The obvious conclusion is that the lens is not a factor in accommodation.

There is another striking case to disprove the medical theory, namely that of a cataract patient in whose eye the lens has been removed by an operation. In the case of cataract patients, the transparent lens gets covered with an opaque film of foreign matter so that the patient gradually loses sight and ultimately becomes blind. Usually the lens is removed by an operation and glasses are supplied to serve the purpose of the lens. These patients are usually supplied with two sets of glasses, one for reading purposes and the other for distant vision. It has been possible for many to read at thirteen and ten inches and even at a less distance with the distant glasses; Dr. Bates says that one man was able to read without any glass at all. Even a single case of this class is enough to prove that the lens had nothing to do with the adjustment of the focus to different distances.

Thus it has been proved beyond doubt, that the shape of the eye-ball does change when the vision is adjusted to suit the distance, owing to the action of the extrinsic muscles attached to the eye-ball, which shorten the distance of the back from the lens, when a distant object is viewed, and widen that distance for seeing near objects. The eye can therefore be compared to a folding or collapsible camera; it (the eye) can be lengthened or shortened according to need, provided there is no nervous strain which might paralyse the mechanism, temporarily or permanently. This is so because the eye-ball is elastic, and there are external muscles, which are designed by Nature to bring about this adjustment.

CHAPTER III

The True Cause of Defective Vision.

There are two common defects of the eye-sight, namely short-sight and long-sight; the latter is also called old sight; there are other miscellaneous defects, which need not be specifically mentioned; all are due to the same cause, the removal of which will restore normal vision.

In short-sight the length of the eye ball from the front to the back—where the retina is--is longer than in the normal eye, and cannot be shortened to suit the distance of the object; in the long-sight the length is less than in the normal eye, and cannot be lengthened.

Dr. Bates thought that the cause of these defects is strain of the nerves, causing failure of the external muscles, by which the normal eye accommodates itself to the distance of the object; and he devised methods of resting the eyes—which will be described later—in order to remove the strain. As will be explained later this system has proved a failure in a very large class of cases. The reason is that Bate's notion of the cause was superficial.

It is true that strain exists in all cases of defective vision; but this strain itself is the effect of more deep-lying causes; unless those causes are known, the right methods of cure cannot be found; for unless the deeper

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causes are removed, the strain which is an effect, will remain.

This is very well illustrated by the following case. Mr. Harry Benjamin of London was suffering very much from defective sight along with serious constitutional abnormalities. Even at the age of five, he was made to wear glasses of minus ten dioptres; the glasses were made more and more powerful, as he became older; at the age of fifteen he was wearing glasses of minus fourteen dioptres. This could not go on indefinitely, because the real cause, the constitutional maladies, were neglected. When he was seventeen there came a crisis; he developed a hemorrhage (bleeding) in the left eye, and was taken to a hospital and kept there for some months; there his eyes became even worse; he was then wearing glasses of minus eighteen dioptres. With these he somehow managed to get on with his clerical work. Soon he was forced to give up his work altogether, as there was a danger of his going blind. "This advice," he writes "came from a Harley Street Specialist, who was, and still is, one of the shining lights in the world of ophtholmology." So he took up a travelling agency for some oil company; thus he got on for a few more years, at the same time pursuing his studies in philosophy, psychology and political science. In the meantime he was making his annual pilgrimage to the 'great specialist;' the latter gradually made it plain to him—what he knew without his telling

—that his sight was getting worse and worse; at the age of twenty-six he was wearing glasses of the highest power available. Now he was definitely told that nothing more could be done for him, that he should give up reading, and that he should be 'careful ever afterwards, lest the retina of the eye should become detached, through an unexpected strain'. Yet he continued to work; at twentyeight he found himself rapidly becoming blind; the slightest effort to see closely gave him pains in the head; he was so desperate as to be willing to submit to any proposal, however drastic; but the great specialist had to confess that he was utterly powerless to help him.

It was at this stage that a friend of his got Dr. Bates' work read to him. That friend's brother had practised Dr. Bates, methods and obtained benefit. Benjamin learnt from this book that as long as glasses were being worn, there could be no cure—that he must discard his glasses, in order to practise the new method. So he threw up his job, gave up the glasses, and under the guidance of a practitioner of Bates' method began the task of re-educating his eyes. He could hardly see anything at first, but in a few days he began to improve; in a short time he could see well enough to move about un-aided, but not to read. So far Bates' method did good; but his progress stopped there; the method, it was seen, did not remove the cause.

Now, fortunately, he came in contact with another practitioner of the same method, *who was also a Nature-curist.* The latter convinced him that Bates' method alone would never *cure* him,—that it was necessary to treat the body as a whole, so as to change the bodily constitution for the better, and thus remove the underlying cause of the eye-defect. Benjamin gladly put himself under the guidance of this teacher of the natural way. Under his advice, he changed his diet, he began to live on fruits and vegetables, instead of the customary diet of meat, white bread, and other denatured foods. This acted like magic; by the end of a three week's course he was able to read, without glasses, though very slowly and painfully! In a year or so, he could read and write quite well—without glasses, like normal people; he has written a book giving his own experience and advice to sufferers.

This is a typical case; that is, there are only too many cases, in which Dr. Bates' method is bound to fail, if relied upon, to the exclusion of the approved methods of Nature-cure—change of diet, and other items of what we call dietetic rightousness, and other constitutional treatment, which we call *Health-culture.* It is even possible to discard Dr. Bates' methods altogether, relying entirely on the above named methods of Nature-cure, which produce ameliorative changes in the constitution, and thus cause the defect of sight to disappear of itself; for when the cause is removed, the effects will disappear of their own accord; this has been verified in such a difficult case as catarct—which is considered to be incurable, and therefore to be relieved only by undergoing a very costly operation; Dr. Sarma K. Lakshman (Pudukotah S. I. Ry.) cured two such cases about sixteen years ago, by purely natural methods, without any treatment for the eyes.

In one of these cases the patient was more than sixty years old. He came to Dr. Lakshman for a letter of recommendation to a reputed surgeon, who was the chief medical officer of the State, and he got the letter, and had his eyes examined by the doctor; the latter told him that he should wait for six months, allowing the cataract to mature, and then come to him for operation; when Dr. Lakshman was told of this, he advised him to give a trial to Nature-cure first at least those six months; the patient gladly followed his instructions,—taking curative cooling baths and sun baths, and adhering to a strictly regulated diet; he took no food in the morning; he took his dinner—of rice and conservatively cooked vegetables—at noon; at night he took only a little raw milk, and fruit. Meanwhile he was going to the other doctor regularly once a week, to get himself examined for signs of improvement, if any; the latter found the cataract getting less and less, and by the end of the period named by him, there was no cataract left for him to operate.

This patient had to pass through many curative crises*, especially dysentry and cough; he also complained of a burning sensation of the eyes, and a slightly viscous fluid escaping from them; he was made to understand that these were beneficial processes—stepping stones to the final cure.

The other case was that of Dr. Lakshman's own mother. She was almost blind when she began treatment: a surgeon had examined her eyes in Bombay, and had informed her that she must undergo an operation within two months; but under Nature-cure, within six months, she was able to see clearly, and even to do the cooking of the house. A cure has been possible in these cases, since they were not so much "civilised", either in dress or eating. The old man was not much encumbered, so that he was easily cured. In the case of heavily encumbered people (especially where the nervous system is diseased) much patience and perseverence will be required, in order to achieve success.

Thus it is plain, that Dr. Bates has not succeeded in evolving a perfectly rational and scientific method of curing eye defects. His system consisting of methods of relaxing the nerves and re-educating the eye muscles through a course of exercises, is grossly inadequate for the radical cure of any but slight defects. In the case of serious defects, Bates' methods fail utterly; they do not remove the real cause of the defects, and hence there is little improvement, and the condition becomes stationary.

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* The reader should study Dr. Lakshman's text-book—Practical Nature-Cure, in two volumes, priced Rs. 3, N.C.P. House, Pudukotah, S.I.R..—in order to understand these and other terms and the principles and methods of Nature-cure.

The reason is, Bates had no more than a superficial understanding of the cause of defective vision. Bates believed that these defects are due to strain and nothing else, that the eye in every case is all right, and could be made to see all right, if only the owner could train himself not to strain himself.

The cause lies far deeper than the strain. The question must be put—and the answer found—why the man strains himself at all. To stop short at this point and conclude that the strain is the cause is as irrational as to be satisfied with the statement that poverty is caused by insufficiency of income—which is true as far as it goes, but is of no value in pointing to the remedy. In only too many cases, the strain is involuntary and habitual; there is a long chain of causation behind the strain. The root-cause is remote, and lies deep in the bodily constitution. Treatment of the eye alone will never touch this cause; hence there is no real cure, but at the most, only slight improvement, or relief from the more painful symptoms.

The notion that the eye is something apart and capable of functioning completely by itself is grossly fallacious; it is incorrect to look npon defective vision as a local disorder. What the sufferer must realise is that inability to see normally, and headaches or nausea induced by reasonable use of the eyes, are symptoms of physical and nervous irregularities which may not at all have their origin in the eyes. Ignorance of this fact leads many to suppose that glasses are the obvious and final remedy. The Secretary of Dispensing Opticians Ltd. of London, says in an article in the 'Daily Telegraph' August 1st 1933, that "in fact many cases of impaired vision are due to disease, which cannot be cured by the use of spectacles, though suitable lenses, may so improve vision and temporarily at any rate, give relief from the associated symptoms that a complete cure will seem to have been effected".

It has been known that such diseases as diabetes and kidney diseases have an effect upon the eyes, and it is generally admitted by medical men, that some cases of cataract are diabetic in origin. Most laymen know that spots before the eyes are an accompaniment of the derangements of the liver and digestive organs. All diseases of the body are shown in the eye; the eye is a mirror in which the signs of bodily disease are exhibited. If the person is suffering from venereal disease, his eyes become deep-seated and shrivelled; if the disease be of the kidney, then the eyes are yellowish in colour; if there is fever, the eyes redden, and experience a burning sensation; if there is asthma or consumption, the eyes whiten.

The remarkable relationship between the eye and the rest of the body is also shown by the Science of Iridology; every change in any organ or part of the body, is registered in the corresponding part of the iris of the eye. It may be mentioned here, that the very existence of this science is unknown to the medical profession; hence they cannot be appealed to on this point. This wonderful relation between the iris and the rest of the body, is the result of the net-work of inter-communication between the nerves of the eye and the autonomic and cerebro-spinal nervous systems.

In the course of my observation I came across a few cases where constipation was found to be at the root of the trouble. In one case, the sufferer was of moderate habits, was living in a village, was practising Yogasanas, and was leading a life quite free from any trouble; later he got employment in the Railway Department, and there his hours of work, time of meals and the kind of food, all changed. He was taking hotel coffee and iddalies in the morning and hotel meals at ten a.m., and had to go to his work immediately afterwards; he partook of savories and sweets in the afternoon. In about a year, he began to suffer from constipation, and in another year, his sight became defective; he was diagnosed as having granules in the eyes and began to wear glasses after an operation. Later on he had to increase the power of the lenses. Though he was lean his lower abdomen was pot-like, and hard, an indication of the constipated state of the bowel. Here it was the 'civilised' life in eating and working that was responsible for his defective vision.

Another case was that of a young man aged hardly twenty who was wearing thick glasses, (minus five dioptres ;) when he was asked if he was sufferiug from any constitutional disease, he admitted that he had chronic head-ache, for which he was taking Cafiaspirin pills.* In this case it was the chronic head-ache, that had compelled him to wear glasses. Defective vision is often only a symptom of constitutional choronic disease.

That the poor sight is due to disease of the body in general can be inferred from the fact that eye-sore, when naturally treated improves vision, since the foreign matter, that is clogging the muscles and blood vessels of the eye, is removed from the eye by this acute crisis.

Thus we learn that in nearly every case there is a defect of the general health often profoundly affecting the whole nervous system, which makes a strain inevitable and habitual. If one has constipated bowels, or has an abnormal digestion, or if his blood is thick with viscous impurities and therefore moves lazily and weakly in his arteries, or if his liver or spleen, or both be out of order, or if his brain and nerves be sick, or irritated and working abnormally, then no single organ in his body can be quite healthy and efficient, whatever the man himself may think or feel. And the eye is no exception to this general depressing effect of a bad foundation of the general health ; its nerves and blood supply are part of the body; it cannot have better nerves, nor better blood, than the body as a whole. Just as a limb or joint may become stiff and unserviceable from impure blood or abnormal nerves, so too the shell of the eye may become stiff and irresponsive to the adjusting mechanism; not only the shell but also the muscles of the eye-ball would be paralysed ; an effort under such disadvantages would necessarily lead to strain ; and when the strain becomes a habit, the eyes would go lame as we may put it, needing the use of crutches, namely glasees. Not the eyes alone, but the mind itself would be affected, and the consequence would be an *involuntary* strain, which no amount of conscious effort, or practice of eye exercises of relaxation can overcome. It is from this deeplying cause that serious chronic incurable infirmities like cataract of the eyes, or other forms of total or partial blindness arise.

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* Cafiaspirin numbs the nerves and gives relief, but poisons the nervous system of the body and finally leads to disease of the brain or nerves.

What is needed, therefore, is to treat the body as a whole, so as to renovate the nerves, and restore the purity of the blood. That is to say, an all-round course of Health-Culture, is needed — the practice of dietetic righteousness, based on a true knowledge of hunger and the laws of digestion and other vital processes. That is to say, there is no such thing as a special treatment for the eyes, or ears, or nose, or throat or any other part of the body. In this connection it should be noted that the constitutional disease of the body can never be radically cured by allopathic medicines; drugs give temporary relief by suppressing the disease; the disease is only carried from the acute to the chronic and then to the destructive stage by drugs. This question has been clearly discussed in the chapter, 'Druglessness' in 'Practical Nature-cure,' Vol. I.

What Glasses do to Us.

When seen through a convex or concave glass, colour is always less intense than when seen with the naked eye and as the perception of form depends upon the perception of colour, it follows that both colour and form must be less distinctly seen with glasses than without them. Glasses can never restore the sight to normal. Even plane glasses lower the vision, both for colour and form, as anyone can note when he looks out of a window.

Glasses are disfiguring and unbeautiful in themselves. There is always the danger of their breaking and causing injury to the wearer and also preventing him from taking part in sports and social pastimes generally.

There is another serious source of injury from glasses. One cannot see through them unless he produces the degree of refractive error which they are designed to correct. But refractive errors, in the eye which is left to itself, are never constant. If one secures good vision by glasses it means that he is maintaining constantly a degree of refractive error, which otherwise would not be maintained constantly. But this is not so in practice. It is a matter of common experience that the condition is made worse. In most cases the spectacle-wearer has to be steadily increasing the strength of his glasses, in order to maintain the same degree of visual acuteness. This is because the glasses accommodate the eye in a fixed and unchangeable way with the result that the strained condition of the eye muscles is only made permanent and intensified; the cause of the trouble is thus not removed. That the human eye resents glasses is a fact which no one would attempt to deny. Every eye specialist knows that patients have to 'get used' to them, and sometimes they never succeed in doing so. Yet they are considered as a boon! Of course it is easy to understand the high esteem in which glasses are held, since in the present state of medical science, millions would be unable to get on with their business as they do now, unless they use glasses, and more and more are resorting to them everyday, because they are made to believe, that defective vision is incurable and that the only thing to do is to wear glasses.

The glasses supplied for correcting a refractive error present in the eye, do in fact conceal for the time being the symptoms of poor sight, and although the more serious condition of the body, which is the *cause* of the defective vision, is not removed, the patient is lulled into a false sense of security and he neglects to take measures for the removal of this cause. The use of glasses will thus merely serve to conceal or relieve the warning symptoms leaving the more serious cause both undiscovered and unrelieved. Such treatment is like stopping the clock in the vain hope of arresting the advance of time. It is not natural, especially for the young, to go on wearing glasses; it will only lead to racial degeneracy.

In short, glasses are only eye-crutches—for eyes that have gone lame—and they help to keep them lame, and in time to make them lamer still. The wise patient should aspire to cure this lameness, so that his eyes will no more need these crutches; in the course of this enterprise he will inevitably reap immense gain of health in other directions, which will make his life better worth living.

CHAPTER IV

Natural Cure of Defective Vision.

Naturopathic practice shows that almost every case is curable and that glasses are quite unnecessary. In many cases the necessity to wear glasses ceases automatically where the complaint is left to itself. One of my friends told me that, some five are six years ago, he was told by some specialist in Bangalore, that he was having 'astigmatism,' in the eye; he was asked to come again after six months to get suitable glasses prescribed and was warned that his eyes would grow worse if he did not wear glasses. But my friend did not at all go to him, and somehow or other, he did not afterward feel the necessity to wear glasses and he is now confident of getting on for ever without glasses. The eye generally sets itself right, if it is given the needed rest. Many years ago, a lecturer of the local college got his old sight cured by taking leave from service for three years.

The Use of Sun-Light.

From the account of the cases given above, it may be seen that sunlight had been one of the chief agents in the treatment of the defects of the eye. We see in the papers, reports of the work of an eye-specialist of U. P., by name Dr. Agharwal, who is following Dr. Bates, methods and is treating short sight of school children by exposing the face (with the eyes closed) to the rays of the morning and evening sun and by certain exercises to the eyes, so as to relax the nerves and muscles of the eye-ball.

Sungazing (looking at the sun with eyes open,) has been found to be very useful in the treatment of granular eyes and some other defects of the eye. Once in the hostel of the Annamalai University, Mr. T., a student, suddenly began to suffer from some itching sensation in the eye. He could neither read nor write. He had been already said to be having granules in his eyes, and he had been advised by an eye specialist to wear glasses. At first I did not know what it could be due to and asked him to apply raw crushed potato to his eyes; but he did not get any appreciable relief. Then a happy idea struck me; I thought that the beneficial rays of the sun, might do him good. So I advised to him to gaze at the early morning and late evening sun for ten seconds at a time. This he did and got complete relief in two days. It was this incident that gave me an incentive to study this subject of the cause and cure of defective sight!

In many cases sungazing gives rise to ill-effects; strain in the eyes is enormously increased and the vision is lowered. Dr. Bates says that blind areas may develop in various parts of the field (retina)—two or three or more! that the sun instead of appearing perfectly white, may appear grey, yellow, red, blue or even totally black. "After looking away from the sun, patches of colour of various kinds and sizes may be seen, continuing a variable length of time, from a few seconds to a few minutes, hours or even months. Organic changes may also be produced. Inflammation, redness of the conjunctive, cloudiness of the lens and of the aqueous and vitreous humours, congestion and cloudiness of the retina, optic nerve and choroid, have all resulted from sun-gazing. *These effects, however,* are always *temporary.* No matter how much the sight may have been impaired by sun-gazing, or how long the impairment may have lasted, a return to the normal, has always occurred; while prompt relief of all the symptoms mentioned has always followed the relief of eye strain showing that the conditions are the result not of the light but of the strain," so writes Dr. Bates, so that one should be careful in practising sun-gazing; although no permanent harm can result from it, great temporary discomfort may be produced; the cautions needing to be observed are given here.

The patient must begin gazing at the sun very early in the morning, and do it for a few seconds; then he should come to the shade and immediately do palming.* This should be repeated many times. With practice, the patient can train himself to look at the sun at higher altitudes. The following case given in Dr. Bates' book, may be of interest to the readers. The sensitiveness of the patient even to ordinary day-light, was so great that she was using a black bandange over one eye and covering the other eye with a nearly opaque smoked glass; she had been kept in this condition of almost total blindness for two years, without any improvement. Other treatment extending over some months had also failed to produce satisfactory results. She was then advised to look directly at the sun. The immediate result was total blindness, which lasted for several hours; but next day the vision was not only restored to its former condition, but was even better. The sun-gazing was repeated; and each time the blindness returned but lasted for a shorter period. At the end of a week the patient was able to look directly at the sun without discomfort and her vision had improved twice the accepted standard for normal vision. Dr. Bates has also focussed the rays of the sun by a burning glass directly upon the eyes of some patients—of course, the light thrown on the eye must not be made too hot—and he says that marked relief has often been obtained in a few minutes. He says that even strong electrical lights, like the sun light, will do no permanent harm, and that it is beneficial for one to get accustomed to this light. It is not light but darkness, that is dangerous to the eye. Prolonged seclusion from the light always lowers the vision; and may produce serious inflammatory conditions.

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* This is described towards the end.

The practice of sun-gazing for the preservation of the eye, is not new to the Hindus (at least to the Brahmins). The Brahmin has to do his sandhya in the morning and in the evening facing the sun, and during the midday prayers he looks at the sun through the hole of the interlocked fingers. The sun is the eye of the world; without his light the human eye cannot see.

So in order to win His grace, our ancients had been practising Suryanamaskars. The very Gayatri-mantra refers to the sun. Sun light is thus such a potential factor in the matter of health. We do not make use of His light, because we do not have to pay for his light; we do not value what we do not pay for.

Diet.

Diet is the most important agency in the matter of revitalising the blood, nerves and muscles of the body. Unless the deeper cause, namely the constitutional disease of the body, is removed, chronic defective vision can never be completely cured. The central teaching of Naturotherapeutics is that "if you take care of your health (by breathing pure air, exposing the skin sufficiently to sun-light, and eating pure and *positive* foods *) disease will take care of itself (will get itself cured).

Diet should be made decidedly positive by reducing the items of negative diet to a negligible minimum and increasing the positive items. The negative items are all the highly nutritious ones—those that have a high proportion of protein, starch, sugar, or fat,—such as refined sugar, white bread, pulses, and all things made with maida or white flour; these have to be replaced by *genuine* whole meal bread, *sweet* fruit and nuts—to be used in rather low rations. The positive items are raw vegetables, herbs or greens prepared as raw salads, conservatively cooked vegetables, raw milk, fruits etc.

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* Refer to Sarma's book Practical Nature-Cure Vol. I.

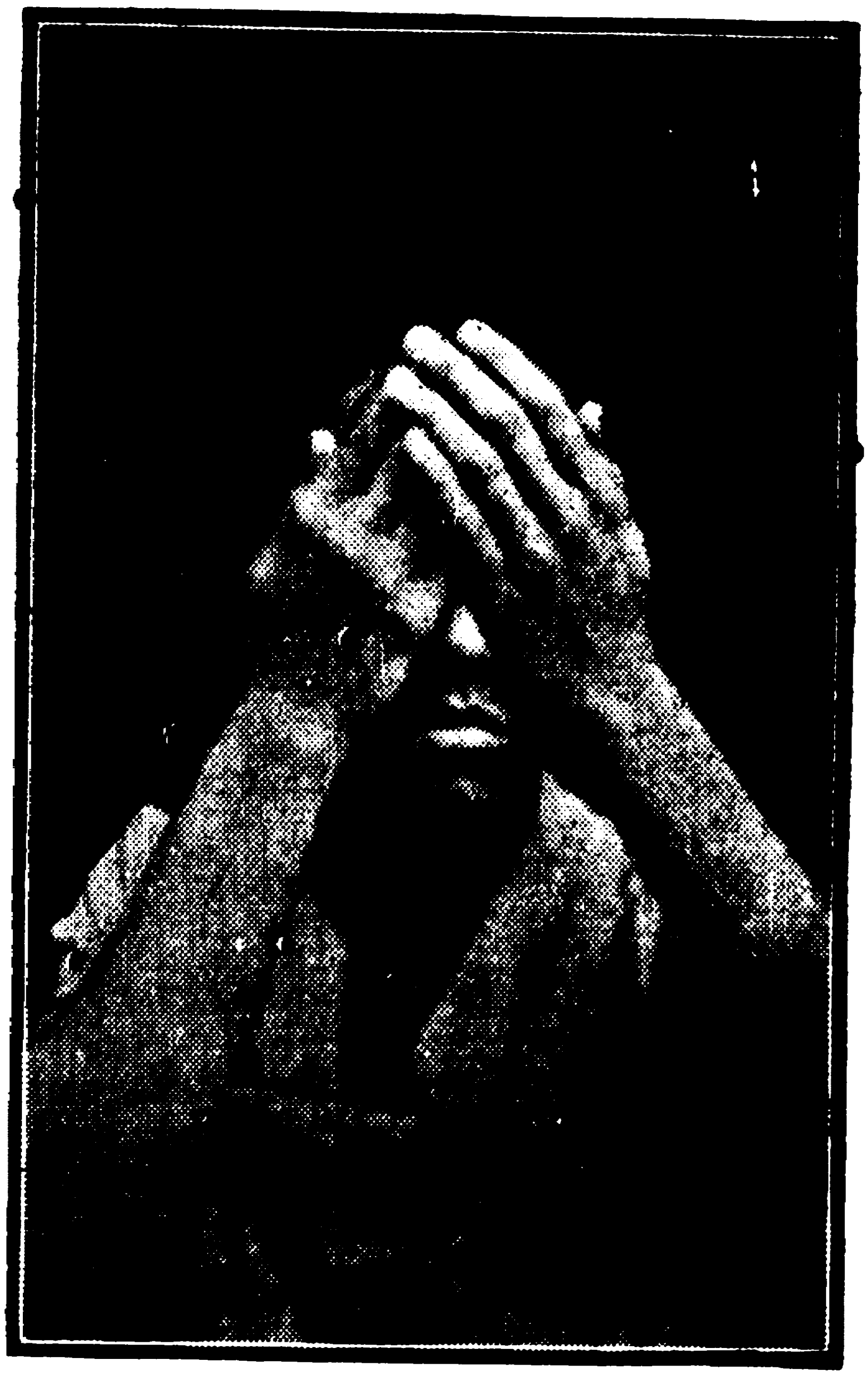
The next is the ensuing of the profitable use of this food through the increase of the vital energy available for the ameliorative changes, by which the cure will be finally attained. One of the most important items of dietetic righteousness is the relation between work and digestion. Other points relate to the number and weight of meals. These points will be rightly understood by a careful study of the book 'Practical Nature-Cure Vol. I'; it is indispensable that the patient should study and master the contents of this book.

Baths.

Local cold bath can be taken by taking cold water in the hands from a basin, and splashing the eyes with it; it will cool the eyes and will improve vision. This is best done after sun-gazing and palming both in the morning and in the evening.

The spinal bath will improve the nervous tone to a great extent. Hip baths are also useful in aiding the bowel and increasing the digestive power. For detailed descriptions of these baths the reader is advised to refer to Sarma's 'Practical Nature Cure' Vol. II.'

Bates' Exercises.



Palming is a means of relieving strain; this consists in covering the closed eyes with the palms of the hands (the fingers being crossed upon the forehead as shown in the figure), in such a way as to avoid pressure on the eye balls. We all instinctively close the eyes whenever we feel a strain in them; most patients are benefited merely by closing the eyes. But by means of 'palming,' a greater degree of relaxation can be obtained, as else some light will come through the closed eye lids.

In the case of some, even with the eyes closed and covered in such a way as to exclude all the light, the visual centres are still disturbed and the patients see illusions of lights and colours. The worse the condition of the eye sight, the more numerous and persistent are the appearances. Normally the field should appear so black that it will be impossible to remember, imagine or see anything blacker, as one ought to do when the optic nerve is not working. Worry or depressions of mind also make it difficult for patients to see black when they palm. Such patients can be greatly helped by the memory of a black object. This can be done by the patient as follows:—first look at a black object from a distance at which the black colour can be seen best, then closing the eyes, remember the black colour and repeat until the memory appears to be equal to the sight. Palming will be more successful as the patient practises the other parts of the natural treatment for the eye.

To palm, the patient should first sit in a canvas easy chair or in any other comfortable seat, and get himself as relaxed, as possible. He should then close his eyes with the palms as shown in the figure and allow the elbows to drop on the knees. If the patient finds some other position more restful, he may do so. What he has to do is only to close the eyes, keep them as relaxed as possible and covered with the palms of the hands. In this way the eyes can be rested; when palming, the blacker the colour that is seen, the more relaxed will be the eyes. It will be profitable for the patient to rest his mind, by not dwelling on subjects likely to affect him strongly or think about the condition of his eyes; but he would do well to try to imagine the blackness growing blacker and blacker, or by just letting the mind to wander as it likes.

Swinging is another method of inducing relaxation of the eyes by its soothing and relaxing effect upon the whole nervous system. This is performed as follows: the patient stands upright with the feet one foot apart, with the hands loosely at the sides; then keeping himself as relaxed as possible, gently sways the whole body from side to side — imagining himself to be the pendulum of a clock. Another very effective means of relieving eye strain is by swinging before a window. The window would seem to move the opposite way to the person. This sense of opposite movement should be noted and encouraged. Then the eyes held as loosely and as relaxed as possible, should be closed, and the swinging still continued, at the same time imagining the opposite movement as clearly as possible. This opening and closing should be done alternately for about two minutes each time.

Aids to Vision : All sufferers from defective vision should cultivate the habit of blinking. Normal eyes blink all the time they are open, but it is done so rapidly, however that it is not noticed. Defective eyes are strained and become fixed, so that blinking needs to be consciously cultivated. This can be done at all times, no matter what one may be doing, even reading. It will be found that a great deal more reading can be done in this manner.

Memory and imagination are also aids to vision. The cultivation of the powers of memory and imagination is of great importance for those suffering from defective vision. This can be done as follows: choose any small object; and look at it closely; observe well its size and shape and run your eyes round the edge of the object, and then after getting a clear mental picture, close your eyes; try to remember the object as exactly as possible; then open your eyes and look at the object again closely. Repeat this many times (without wearing glasses of course.)

Excessive reading is supposed to be responsible for eye-strain, especially in bad light; but the truth is that reading can never cause defective vision. No amount of reading will ever affect the normal eyes. It is only when reading is done at an unnatural hour, that is at a time when the vital energy is demanded by his digestive organs, that reading is likely to do any harm. Reading is one of the best ways of keeping the eyes active and healthy. The secret of successful reading is to read without strain. This is done as follows: Remove the glasses, palm for a few minutes, then take a book and begin to read, keeping the book at a distance where the print is seen best. Read a few lines, or just a few words, until the eyes begin to tire, then stop reading and close the eyes for a few seconds and begin again. Keep blinking often, while reading. In this way you can read with ease and without strain. Thus the eyes should be given the work they want to do, but they must never be strained. No hard and fast rule can be given, as to how long this reading can be done; but by practice one can read for at least two or three hours at a time without effort.

In the case of those whose eyes are not both equally bad, it is necessary to read with one eye at a time, and this is done by covering one eye with an eye-shade, whilst using the other; the shade can be transferred to the other eye, when the first one is tired. Those with one eye weaker than the other, should practise reading more with the weaker than with the stronger one.

Eye Muscle Exercises.

The following exercises serve to loosen up the strained and contracted muscles surrounding the eyes. These exercises are performed while sitting comfortably in an arm-chair or easy chair.

Exercise 1. Keeping the head still, and as relaxed as possible, move the eyes up and down, many times (at least six). Move the eye slowly as far up as possible and as far down as possible. Minimum effort should be used here.

As the eyes improve, the patient will be able to see lower down and higher up. The six movements should be repeated two or three times with rests of a few seconds between.

In the same way move the eyes from side to side without any effort.

Exercise 2. *Way to improve accommodation.* Hold up the fore finger of the right hand (about eight inches) in front of the eyes, then look away from the finger to any large object, ten or more feet away—the door or a window. Look from one to the other ten times, then rest for a second and repeat the same two or three times.

Exercise 3. Move the eyes gently and slowly in a circle, then move them back in the reverse direction. This may be done four times with rest for a second between and these four movements are to be repeated twice or thrice, being careful to use the minimum effort.

All the foregoing exercises should be done after palming. There should be a few seconds of palming between exercises 1 and 2; 2 and 3. Glasses should not be worn when doing these exercises.

Neck Exercises.

The purpose of these is to loosen the contracted neck muscles. The best time for doing this is on rising from bed; five minutes may be enough for these.

Exercise 1. Stand at ease, with the hands hanging at the sides, then raise the shoulders as high as possible, keeping them raised, draw them as far back as possible, then lower them and return to the normal position. Repeat this many times, making the movements one continuous rise and fall of the shoulders. The same exercise is then repeated in the reverse direction.

Exercise 2. Drop the head as far forward as possible on to the chest, keeping the neck relaxed. Then raise the head and allow it to fall as far backward as possible on to the shoulders and back. Repeat this a number of times.

Exercise 3. Drop the head forward on the chest as in the last, then describe a complete circle with it; that is, turn first over the right shoulder, then down over the back, next over the left shoulder, then return to the first position. Do this in the reverse direction; the neck must be kept relaxed all the time.

Exercise 4. Rotate the head as far to the left as possible, keeping the rest of the body still. Return to the normal position and in the same way rotate to the right side.

These four exercises done in the morning rising up from bed will ease the upper muscles of the spine and neck and so there will be better blood supply to the head and the eyes.

What therefore, the sufferer from defective vision needs to do, is to study and master the science and art of Natural Healing with the aid of a good text-book, such as 'Practical Nature-cure',—a book which has been written with the aim of enabling the reader to become his own doctor. He must follow the general health-culture treatment given there in detail; this will give him a radical cure, through the removal of the ultimate cause—the root cause—namely the derangement of his general health. It may be asserted that even though such derangement is unsuspected, it is sure to exist. Batesian methods and the exercises described above may be made use of to quicken the cure. They will be very helpful in the case of young persons having slight defects.

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